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BIBDATASHEET

CONFIRMATION NO. 1914

Bib Data Sheet

SERIAL NUMBER 10/735,497	FILING DATE 12/12/2003 RULE	CLASS 424	GROUP ART UNIT 1616	ATTORNEY DOCKET NO. 00025.03CON
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APPLICANTS

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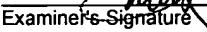
** CONTINUING DATA *****

This application is a CON of 10/151,596 05/16/2002
 which claims benefit of 60/294,203 05/24/2001
 and claims benefit of 60/317,479 09/05/2001

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/23/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	1	24	5
Verified and Acknowledged	Examiner's Signature  Initials				

ADDRESS

37485
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TITLE

Delivery of analgesics through an inhalation route

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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